

Entered - 02-06-01 - sb
CL 01L0088 - GWENDOLYN BURNS

CLAIM OF:

LEONARD A. MEYER
195 Helmsley Drive, NW
Atlanta, Georgia 30327

01- R -0947

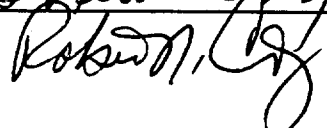
For vehicular damages alleged to have been sustained from a construction cut in the roadway that was left open and in an unsafe condition on January 8, 2001 between 801 and 797 Mt. Paran Road, NW.

THIS ADVERSED REPORT IS
APPROVED

BY:



ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

 R. M. Gray

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 01L0088

Date: June 6, 2000

Claimant /Victim LEONARD A. MEYER
BY: (Atty) (Ins. Co.) _____
Address: 195 Helmsley Drive, NW, Atlanta, Georgia 30327
Subrogation: _____ Claim for Property damage \$ 371.16 Bodily Injury \$ _____
Date of Notice: 2/5/01 Method: Written, Proper X Improper _____
Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X
Date of Occurrence 1/8/01 Place: Between 801 & 797 Mt. Paran Road, NW
Department _____ Division _____
Employee involved _____ Disciplinary Action: _____

NATURE OF CLAIM: Claimant alleges that his vehicle sustained damage when he drove over a construction cut in the roadway that was not properly covered and left in an unsafe condition. An investigation determined that United Water Services Atlanta performed work at the incident location. The claimant's claim has been forwarded and resolved by United Water Services Atlanta.

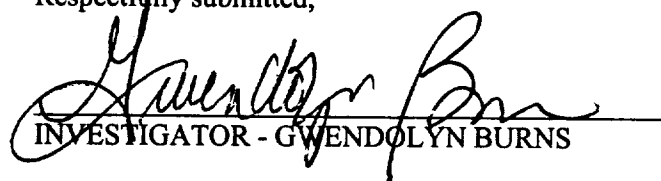
INVESTIGATION:

Statements: City employee _____ Claimant _____ Others _____ Written _____ Oral _____
Pictures _____ Diagrams _____ Reports: Police _____ Dept Report _____ Other X
Traffic citations issued: City Driver _____ Claimant Driver _____
Citation disposition: City Driver _____ Claimant Driver _____

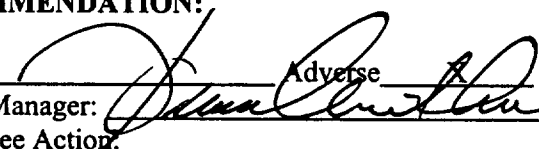
BASIS OF RECOMMENDATION:

Function: Governmental _____ Ministerial _____
Improper Notice _____ More than Six Months _____ Other X Damages reasonable _____
City not involved X Offer rejected _____ Compromise settlement _____
Repair/replacement by Ins. Co. _____ Repair/replacement by City Forces _____
Claimant Negligent _____ City Negligent _____ Joint _____ Claim Abandoned _____

Respectfully submitted,


INVESTIGATOR - GWENDOLYN BURNS

RECOMMENDATION:

Pay \$ _____ Adverse _____ Account charged: 1A01 _____ 2J01 _____ 2H01 _____
Claims Manager:  Concur/date 06-15-01
Committee Action: _____ Council Action _____

RECEIVED FEB 5 2001

COUNCIL OF THE CITY OF ATLANTA
MUNICIPAL CLERK
City Hall
55 Trinity Avenue, S.W.
Atlanta, Georgia 30335

RE: CLAIM FOR DAMAGES

Today's Date: Jan 12, 2001

Dear Municipal Clerk:

ENTERED - 2-6-01 - SB
01L0088 - GWEN BURNS

BURNS
02/05/01
Dm

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ 371.16 property and/or \$ _____ bodily injury for which I contend the City is liable.

1. Date of incident: 1/8/2001 2. Time of Incident: 11:30AM 3. Police called: _____ ☒ Yes ☐ No
(month/day/ year)
4. Location of incident (including street address): Between 801 and 797 Mount Paran Road NW
5. Name of your insurance company: Atlantic Mutual Ins. Co. Policy No. 285231878
6. State what and how incident occurred: My wife was driving West on Mt. Paran Road and struck a pothole excavation (dug by the Water Company according to a neighbor a week ago). The hole was approximately nine inches deep and was not covered by a steel plate nor filled with dirt. The impact exploded the right front tire, bent the wheel and tore the front end out of of alignment. Another car had just had the same result owned by Jean Held.
7. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!
8. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle (copy of the current tag receipt or title).
Your vehicle: Infiniti I 30 2000 838PI Janet M. Meyer
(Make) (Year) (Tag Number) (Driver's Name)
City vehicle: _____
(Make) (City Driver's Name) (Department/Bureau)
9. Witness: Jean Held 404-256-2864 and 404-240-9119
(Name) (Address) (Telephone Number)
10. The acknowledgment of this claim in no way waives the Sovereign immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).
11. This claim should be mailed immediately to the address shown above.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE
INFORMATION IS TRUE AND CORRECT.

Leonard A. Meyer
Signature of Claimant

Leonard A. Meyer

(Print Claimant's Name)

195 Helmsley Drive NW

(Address)

Atlanta, GA 30327

(City, State and Zip Code)

404 874 8727

(Work Number)

404 257 1450

(Home Number)

01-R-0947